

## PART B - FEE(S) TRANSMITTAL

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7/90

06/03/2002

ERIC M. DOBRUSIN, ESQ.

DOBRUSIN, DARDEN THENNISCH &amp; LORENZ, P.C.

401 S. OLD WOODWARD AVENUE

SUITE 311

BIRMINGHAM, MI 48009

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Ravi L. Masquele

BY 1299266579US

Ravi L. Masquele

(Signature)

08-27-02

(Date)

APPLICATION NO. 08/941,170	FILING DATE 09/30/1997	NAMED INVENTOR ERIC MCFARLAND	ATTORNEY DOCKET NO. 65304-020	CONFIRMATION NO. 5695
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TITLE OF INVENTION: POTENTIAL MASKING SYSTEMS AND METHODS FOR COMBINATORIAL LIBRARY SYNTHESIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$640	\$0	\$640	09/03/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
PONNALLURI, PADMAASHRI	1627	436-518000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.333).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. DOBRUSIN &  
2. THENNISCH PC  
3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SYMIX TECHNOLOGIES, INC.

Santa Clara, Michigan

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

☒ Issue Fee☐ A check in the amount of the fee(s) is enclosed.☐ Publication Fee☐ Payment by credit card. Form PTO-2038 is attached.☐ Advance Order - # of Copies \_\_\_\_\_☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50 0496 (enclose an extra copy of this form).

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(Date)

*Eric M. Dobrusin*  
Eric M. Dobrusin, Esq. Reg. No. 32,867  
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

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